

# Grant Delivery System (GDS) - WebGrants

## High School System Administrator's Access Request Form



A signed Information Security and Confidentiality Agreement must be received and approved by the California Student Aid Commission prior to accessing the GDS - WebGrants system.

<b>I. High School Section</b>			
High School Name			
High School Address	City	State	Zip Code
College Board Code	CDS Code		
WASC Accreditation Code (or other eligible regional accreditation code)	Accreditation Association Contact Information (if other than WASC)		
<b>II. Personal Information Section (to be completed by person requesting access)</b>			
Name (Last, First, Middle Initial)			
Special Identifier (Check only one; limited to nine alpha-numeric characters maximum)			
<input type="checkbox"/> SSN <input type="checkbox"/> Pet's name <input type="checkbox"/> Mother's maiden name <input type="checkbox"/> Other			
I certify that I have received and reviewed all security and confidentiality policies pertaining to the use of the Commission's GDS – WebGrants System.			
Signature		Title	Date
Email Address (see instructions on the reverse)	( ) -	( ) -	
	Phone Number	Fax Number	
<b>III. Access Request and High School Certification Section (to be completed by PRINCIPAL verifying access)</b>			
Date Request Submitted			
New <input type="checkbox"/>	If Changing user from a School System Administrator to a User , please fill out User Access Request form.	Delete <input type="checkbox"/>	User ID
I certify that I am the High School's Principal and that I have designated the above named employee as our System Administrator for the GDS - WebGrants System.			
Name of Principal - print or type		( ) -	
Signature of Principal		Telephone Number	
		( ) -	
		Fax Number	
		Email Address	
For CSAC Use Only	Updated By	Date	

## How to fill out the System Administrator's Access Request Form

This form is required for the high school's System Administrator.  
It is to be certified by the High School Principal and returned to the Commission.

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### I. High School Section:

- Fill in the high school's name, address, city, state, and College Board code, CDS code and WASC Accreditation and/or Accreditation Association Contact information.

### II. Personal Information Section:

- Enter Last and First Name and Middle Initial of the System Administrator requesting access.
- Requesting System Administrator must enter a unique 9 (maximum) alpha-numeric character **special identifier**, which will be used to verify the identification of the person needing access. Special identifiers may be your SSN, your mother's maiden name, your pet's name or other such as your driver's license number. It is imperative that the System Administrator retain a copy of this completed form for their records.

NOTE: All System Administrator's email addresses will be added to the HS WebGrants list service for periodic updates relative to WebGrants system availability, Production Schedule changes and training opportunities.

- Each System Administrator must sign the form and certify that all security and confidentiality policies have been received and reviewed.

### III. Access request and High School Certification Section:

- Provide the date the form was completed.
- Check the appropriate box:

**New access** – Once approved and processed, the new ID will be mailed directly to the System Administrator. Secure passwords will be emailed to the System Administrator.

**Change** existing access

**Delete** access

For request types of **Change** and **Delete**, please provide the GDS - WebGrants system User ID (to be provided by the Commission upon approval) in the space provided.

NOTE: When calling the Help Desk for assistance, you must provide your Special Identifier to verify your identity. Passwords and IDs will NOT be released without this confirmation.

- Enter the name, telephone number, facsimile number and e-mail address of the high school's Principal verifying this request.
- The high school's Principal **MUST** sign the form.

**NOTE: A high school's Principal and System Administrator may not be the same person.**

#### Mail forms to:

California Student Aid Commission  
Information Technology Services Division  
Attn: CSAC HelpDesk  
P.O. Box 419026  
Rancho Cordova, CA 95741-9026

***Retain a copy of this completed form.***